

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744469

Entity Name: FLORIDA SOCIETY OF ENROLLED AGENTS, INC.

Current Principal Place of Business:

1920 E ROBINSON STREET
ORLANDO, FL 32803

Current Mailing Address:

P O BOX 1041
ELFERS, FL 34680-1041 US

FEI Number: 59-1853783

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WISEMAN, EA, KAREN M
7747 MITCHELL BLVD
SUITE C
TRINITY, FL 34655 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KAREN M WISEMAN, EA

04/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title IPP
Name KIDWELL, EA, RAYMOND
Address P O BOX 1041
City-State-Zip: ELFERS FL 34680-1041

Title P
Name FREZZA, EA, TONY
Address P O BOX 1041
City-State-Zip: ELFERS FL 34680-1041

Title PE
Name VENSEL, EA, LAURA
Address P O BOX 1041
City-State-Zip: ELFERS FL 34680-1041

Title T
Name WISEMAN, EA, KAREN
Address 290 NW PEACOCK BLVD
City-State-Zip: PORT ST. LUCIE FL 34988

Title S
Name ROSA, EA, MARGO
Address 290 NW PEACOCK BLVD
City-State-Zip: PORT ST. LUCIE FL 34988

Title VP
Name MORALES, NICHOLE EA
Address P O BOX 1041
City-State-Zip: ELFERS FL 34680-1041

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAREN WISEMAN, EA

TREASURER

04/01/2019

Electronic Signature of Signing Officer/Director Detail

Date